## DEPARTMENT OF CIVIL SERVICE EMPLOYEE BENEFITS DIVISION FY 2007-2008 LIFE INSURANCE PREMIUM RATES

(Effective October 7, 2007)

				BIWEEKL	EKLY		ANNUAL				<b>BIWEEKLY - PART TIME *1</b>				ANNUAL - PART TIME *1			MONTHLY (CGIS)		
PLAN NAME/CODE	Option	Employee		State	State Total		Employe	e State	Total		Employee		State	Employee		State	Leave/LO		COBRA	
Dependent Life Options																				
Spouse \$1,500 &/or Child(ren) \$1,000	F	\$	0.20	\$0.00	\$	0.20	\$ 5.2	\$0.00	\$	5.20	\$	0.20	\$0.00	\$	5.20	\$0.00	\$	0.43	(n/a)	
Spouse \$5,000 &/or Child(ren) \$2,500	G	\$	0.60	\$0.00	\$	0.60	\$ 15.6	\$0.00	\$	15.60	\$	0.60	\$0.00	\$	15.60	\$0.00	\$	1.30	(n/a)	
Spouse \$10,000 &/or Child(ren) \$ 5,000	Н	\$	1.20	\$0.00	\$	1.20	\$ 31.2	\$0.00	\$	31.20	\$	1.20	\$0.00	\$	31.20	\$0.00	\$	2.60	(n/a)	
Spouse \$25,000 &/or Child(ren) \$10,000	K	\$	4.00	\$0.00	\$	4.00	\$ 104.0	\$0.00	\$	104.00	\$	4.00	\$0.00	\$	104.00	\$0.00	\$	8.67	(n/a)	
Child(ren) Only \$10,000	L	\$	0.75	\$0.00	\$	0.75	\$ 19.5	\$0.00	\$	19.50	\$	0.75	\$0.00	\$	19.50	\$0.00	\$	1.63	(n/a)	
Employee Life Options																				
The Employee Only regular plan is 2 times your annual salary, up to a maximum of \$200,000. The State pays 100% of the premium for this plan.																				
The Employee Only reduced plan is 1 times your annual salary, up to a maximum of \$50,000. Employees enrolled in this plan will receive a biweekly rebate beginning October 19, 2006.																				

<sup>\*1</sup> Part-time employees hired after 1/1/2000 (1/1/2002 for bargaining units A02 and A31) whose regular work schedule is 40 hours or less per biweekly pay period.